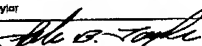


<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number (optional) 396542
<p>I hereby declare that:</p> <p>My residence and post office address and citizenship are stated below next to my name.</p> <p>I am authorized to act on behalf of the following assignee: <u>Foliar Nutrients, Inc.</u></p> <p>and the title of my position with said assignee is: <u>President</u></p> <p>The entire title to the patent identified below is vested in said assignee.</p>		
<p>Name of Patentee(s): <u>John B. Taylor</u></p>		
<p>Patent Number <u>5,997,910</u></p>	<p>Date of Patent Issued <u>December 7, 1999</u></p>	
<p>Title of Invention <u>PLANT FERTILIZER COMPOSITIONS CONTAINING PHOSPHONATE AND PHOSPHATE SALTS AND DERIVATIVES THEREOF</u></p>		
<p>I believe said patentee(s) to be the original, first and sole/joint inventor(s) of the subject matter which is Described and claimed in said patent, for which a reissue patent is sought on the invention entitled <u>PLANT FERTILIZER COMPOSITIONS CONTAINING PHOSPHONATE AND PHOSPHATE SALTS AND DERIVATIVES THEREOF.</u></p> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto.</p> <p><input type="checkbox"/> was filed on _____ as reissue application number _____ / _____ and was amended on _____ (if applicable)</p> <p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.</p> <p>I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input checked="" type="checkbox"/> by reason of a defective specification or drawing.</p> <p><input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.</p> <p><input type="checkbox"/> by reason of other errors.</p> <p>At least one error upon which reissue is based is described as follows: that the "millimole" language at column 3, line 52 and column 4, line 51 is an obvious typographical error in that "millimole" was intended to be "millimolar" in the specified concentration range as "millimolar" is a unit of concentration while "millimole" is not;</p> <p>that the phosphonate salt formula at column 8, lines 27-35 contains an obvious typographical error in that the bond between P and R2 has to be a single bond rather than a double bond as shown;</p> <p>that the specification at column 8, lines 49-50 and claim 1 at column 10, line 26 contains an obvious typographical error in that the term "alkynyl" was clearly intended to be "alkynyl"; and</p> <p>that the Patentee did not claim all that he had the right to claim in the patent in that the method of the invention was not claimed in an alternative fashion reciting the materials used in the preparation of the first and second salts, such alternative method being clearly supported in the specification of the patent.</p> <p>Patentee respectfully submits that the statements of errors herein comply with the requirement of 37 C.F.R. § 1.175 (a)(1) of identifying the errors in the original patent relied upon as the basis of reissue. However, Patentee respectfully submits that the statements above do not constitute an admission that those errors render the original patent claims inoperative or invalid.</p> <p style="text-align: center;">[Attach additional sheets, if needed.]</p> <p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.</p>		

10/19/99  
10/04046  
U.S. PTO

<b>(REISSUE APPLICATION DECLARATION BY THE ASSIGNEE)</b>		Docket Number (Optional) 000042	
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.			
Name(s)	Registration Number		
Kenneth D. Goetz	32,606		
William A. Rudy	34,918		
Peter C. Knops	37,859		
Janet D. Strobe	64,758		
Correspondence Address: Direct all communications about the application to:			
<input type="checkbox"/> Customer Number		<div style="border: 1px solid black; padding: 5px; display: inline-block;">             Type Customer Number Here           </div> <div style="display: inline-block; vertical-align: middle; margin-left: 10px;">→</div> <div style="border: 1px solid black; padding: 5px; display: inline-block; margin-left: 10px;">             Place Customer Number Bar Code Label Here           </div>	
OR			
<input checked="" type="checkbox"/> Firm or Individual Name	LATHROP & GAGE LC		
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Zip	64108		
Country	United States of America		
Telephone	(816) 460-8848	Fax	(816) 290-8001
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.			
Full name of person signing (given name, family name)			
John B. Taylor			
Signature			Date 10/19/01
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<input type="checkbox"/> Additional Patentees are named on separately numbered sheets attached hereto.			